Male Respondent File Codebook :: SECTION I: Health Conditions and Health Services :: (IA) Access to health care

USUALCAR(3768-3768)

Variable Type: raw

IA-1: Is there a place that you usually go to when you are sick or need advice about health?

| value | label | Total |
|-------|------------|-------|
| 1 | Yes | 3370 |
| 5 | No | 1444 |
| 9 | Don't know | 1 |
| | Total | 4815 |

Universe: Applicable for all respondents

USLPLACE(3769-3770)

Variable Type: raw

IA-2: Please look at Card 25a. What kind of place is it?

| value | label | Total |
|-------|---|-------|
| ļ. | INAPPLICABLE | 1445 |
| 1 | Private doctor's office or HMO | 1944 |
| 2 | Community health clinic, community clinic, public health clinic | 553 |
| 3 | Family planning or Planned Parenthood Clinic | 23 |
| 4 | Employer or company clinic | 113 |
| 5 | School or school-based clinic | 62 |
| 6 | Hospital outpatient clinic | 109 |
| 7 | Hospital emergency room | 207 |
| 8 | Hospital regular room | 89 |
| 9 | Urgent care center, urgi-care, or walk-in facility | 169 |
| 10 | Sexually transmitted disease (STD) clinic | 8 |
| 20 | Some other place | 85 |
| 98 | Refused | 1 |
| 99 | Don't know | 7 |
| | Total | 4815 |

Universe: Applicable if R reported a usual place he goes for care (IA-1 USUALCAR = 1)

USL12MOS(3771-3771)

Variable Type: raw

IA-2a: Have you gone to this place in the last 12 months, that is, since [INTERVIEW MONTH, INTERVIEW YEAR - 1]?

| value | label | Total |
|-------|--------------|-------|
| | INAPPLICABLE | 1445 |
| 1 | Yes | 2492 |
| 5 | No | 876 |
| 9 | Don't know | 2 |
| | Total | 4815 |

Universe: Applicable if R reported a usual place he goes for care (IA-1 USUALCAR = 1)

COVER12(3772-3772)

IA-3: Card 75 lists some examples of types of health care coverage. In the past 12 months, that is, since [INTERVIEW MONTH, INTERVIEW YEAR - 1], was there any time that you did not have <u>any</u> health insurance or coverage?

| value | label | Total |
|-------|------------|-------|
| 1 | Yes | 1533 |
| 5 | No | 3231 |
| 8 | Refused | 2 |
| 9 | Don't know | 49 |
| | Total | 4815 |

Universe: Applicable for all respondents

NUMNOCOV(3773-3774)

Variable Type: raw

IA-4: In how many of the past 12 months were you without coverage?

| value | label | Total |
|-------|--------------|-------|
| . | INAPPLICABLE | 3282 |
| 1 | 1 Month | 65 |
| 2 | 2 Months | 43 |
| 3 | 3 Months | 76 |
| 4 | 4 Months | 57 |
| 5 | 5 Months | 30 |
| 6 | 6 Months | 83 |
| 7 | 7 Months | 29 |
| 8 | 8 Months | 36 |
| 9 | 9 Months | 33 |
| 10 | 10 Months | 23 |
| 11 | 11 Months | 24 |
| 12 | 12 Months | 1025 |
| 99 | Don't know | 9 |
| | Total | 4815 |

Universe : Applicable if R did not have insurance coverage for some portion of the past 12 months (IA-3 COVER12 = 1)

COVERHOW01(3775-3776)

IA-5 : Card 76 shows different types of health care coverage. In the past 12 months, that is, since [INTERVIEW MONTH, INTERVIEW YEAR - 1], which of these were you covered by? (1st MENTIONED)

| value | label | Total |
|-------|--|-------|
| | INAPPLICABLE | 1025 |
| 1 | Private health insurance plan (from employer or workplace; purchased directly; through a state or local government program or community program) | 2518 |
| 2 | Medicaid-additional name(s) for Medicaid in this state: [MEDICAID_FILL] | 624 |
| 3 | Medicare | 90 |
| 4 | Medi-GAP | 1 |
| 5 | Military health care including: the VA, CHAMPUS, TRICARE, CHAMP-VA | 243 |
| 6 | Indian Health Service | 34 |
| 7 | CHIP (Children's Health Insurance Program)-add'l names: [state-specific CHIP name] | 41 |
| 8 | Single-service plan (e.g., dental, vision, prescriptions) | 21 |
| 9 | State-sponsored health plan (called [state-specific plan name] in this state) | 70 |
| 10 | Other government health care | 49 |
| 98 | Refused | 3 |
| 99 | Don't know | 96 |
| | Total | 4815 |

Universe : Applicable if R had insurance coverage for all or some portion of the past 12 months (IA-3 COVER12 = 5, DK/RF or IA-4 NUMNOCOV < 12, DK/RF)

COVERHOW02(3777-3778)

Variable Type: raw

IA-5: Card 76 shows different types of health care coverage. In the past 12 months, that is, since [INTERVIEW MONTH, INTERVIEW YEAR - 1], which of these were you covered by? (2nd MENTIONED)

| value | label | Total |
|-------|--|-------|
| | INAPPLICABLE | 4459 |
| 1 | Private health insurance plan (from employer or workplace; purchased directly; through a state or local government program or community program) | 32 |
| 2 | Medicaid-additional names in this state: [state-specific Medicaid name] | 47 |
| 3 | Medicare | 40 |
| 4 | Medi-GAP | 1 |
| 5 | Military health care including: the VA, CHAMPUS, TRICARE, CHAMP-VA | 28 |
| 6 | Indian Health Service | 9 |
| 7 | CHIP (Children's Health Insurance Program)-add'l names: [state-specific CHIP name] | 6 |
| 8 | Single-service plan (e.g., dental, vision, prescriptions) | 163 |
| 9 | State-sponsored health plan (called [state-specific plan name] in this state) | 20 |
| 10 | Other government health care | 10 |
| | Total | 4815 |

Universe: Applicable if reported more than 1 type of health care coverage in the last 12 months (See IA-5 COVERHOW01)

COVERHOW03(3779-3779)

Variable Type: raw

IA-5 : Card 76 shows different types of health care coverage. In the past 12 months, that is, since [INTERVIEW MONTH, INTERVIEW YEAR - 1], which of these were you covered by? (3rd MENTIONED)

| value | label | Total |
|-------|--|-------|
| | INAPPLICABLE | 4795 |
| 1 | Private health insurance plan (from employer or workplace; purchased directly; through a state or local government program or community program) | 4 |
| 2 | Medicaid-additional names in this state: [state-specific Medicaid name] | 1 |
| 3 | Medicare | 3 |
| 5 | Military health care including: the VA, CHAMPUS, TRICARE, CHAMP-VA | 2 |
| 6 | Indian Health Service | 1 |
| 8 | Single-service plan (e.g., dental, vision, prescriptions) | 9 |
| | Total | 4815 |

Universe: Applicable if reported more than 2 types of health care coverage in the last 12 months (See IA-5 COVERHOW01)

NOWCOVER01(3780-3781)

Variable Type: raw

IA-6 : (Which of these, if any, are you covered by now? / Are you covered by any of these health care plans now?) (1st MENTIONED)

| value | label | Total |
|-------|--|-------|
| | INAPPLICABLE | 3893 |
| | Private health insurance plan (from employer or workplace; purchased directly; through a state or local government program or community program) | 423 |
| 2 | Medicaid-additional names in this state: [state-specific Medicaid name] | 140 |
| 3 | Medicare | 21 |
| 5 | Military health care including: the VA, CHAMPUS, TRICARE, CHAMP-VA | 15 |
| 6 | Indian Health Service | 6 |

| | Total | 4815 |
|----|--|------|
| 99 | Don't know | 78 |
| 98 | Refused | 2 |
| 11 | Not covered by any insurance | 195 |
| 10 | Other government health care | 9 |
| 9 | State-sponsored health plan (called [state-specific plan name] in this state) | 19 |
| 8 | Single-service plan (e.g., dental, vision, prescriptions) | 7 |
| 7 | CHIP (Children's Health Insurance Program)-add'l names: [state-specific CHIP name] | 7 |

Universe: Applicable if R lacked insurance coverage for some, but not all, of the last 12 months (IA-4 NUMNOCOV <12) **or** R had more than one type of coverage in the last 12 months (IA-5 COVERHOW had multiple responses) **or** R did not answer about coverage in the last 12 months (IA-5 COVERHOW01 = DK/RF)

Notes: use recode CURR_INS

NOWCOVER02(3782-3783)

Variable Type: raw

IA-6 : (Which of these, if any, are you covered by now? / Are you covered by any of these health care plans now?) (2nd MENTIONED)

| value | label | Total |
|-------|--|-------|
| | INAPPLICABLE | 4552 |
| 1 | Private health insurance plan (from employer or workplace; purchased directly; through a state or local government program or community program) | 2 |
| 2 | Medicaid-additional names in this state: [state-specific Medicaid name] | 16 |
| 3 | Medicare | 30 |
| 4 | Medi-GAP | 1 |
| 5 | Military health care including: the VA, CHAMPUS, TRICARE, CHAMP-VA | 31 |
| 6 | Indian Health Service | 13 |
| 8 | Single-service plan (e.g., dental, vision, prescriptions) | 157 |
| 9 | State-sponsored health plan (called [state-specific plan name] in this state) | 9 |
| 10 | Other government health care | 4 |
| | Total | 4815 |

Universe: Applicable if R reported more than 1 type of current insurance coverage (See IA-6 NOWCOVER01)

NOWCOVER03(3784-3784)

Variable Type: raw

IA-6 : (Which of these, if any, are you covered by now? / Are you covered by any of these health care plans now?) (3rd MENTIONED)

| value | label | Total |
|-------|--|-------|
| | INAPPLICABLE | 4802 |
| | Private health insurance plan (from employer or workplace; purchased directly; through a state or local government program or community program) | 1 |
| 2 | Medicaid-additional names in this state: [state-specific Medicaid name] | 1 |
| 3 | Medicare | 2 |
| 8 | Single-service plan (e.g., dental, vision, prescriptions) | 9 |
| | Total | 4815 |

Universe: Applicable if R reported more than 2 types of current insurance coverage (See IA-6 NOWCOVER01)

Male Respondent File Codebook :: SECTION I: Health Conditions and Health Services :: (IB) Use of family planning clinic

YOUGOFPC(3785-3785)

IB-1: Now please look at Card 69, which shows some family planning and health services. Have you, yourself, ever received services such as these from a family planning clinic or Planned Parenthood clinic?

| value | label | Total |
|-------|------------|-------|
| 1 | Yes | 873 |
| 5 | No | 3937 |
| 8 | Refused | 3 |
| 9 | Don't know | 2 |
| | Total | 4815 |

Universe: Applicable for all respondents

WHENGOFP(3786-3786)

Variable Type: raw

IB-2: When was the last time you received services from a family planning clinic or Planned Parenthood clinic? Was it within the last 12 months, that is, since [INTERVIEW MONTH, INTERVIEW YEAR - 1], or more than 12 months ago?

| value | label | Total |
|-------|-------------------------|-------|
| | INAPPLICABLE | 3942 |
| 1 | In the last 12 months | 380 |
| 2 | More than 12 months ago | 493 |
| | Total | 4815 |

Universe: Applicable if R reported ever receiving family planning services from a family planning clinic (IB-1 YOUGOFPC = 1)

YOUFPSVC1(3787-3787)

Variable Type: raw

IB-3: Please look again at Card 69. Which of these services did you receive at that visit? (1ST MENTION)

| value | label | Total |
|-------|---|-------|
| | INAPPLICABLE | 4435 |
| 1 | Physical exam | 238 |
| 2 | Information or advice on birth control methods, including condoms | 36 |
| 3 | HIV testing | 61 |
| 4 | Testing for sexually transmitted infection other than HIV | 22 |
| 5 | Treatment for sexually transmitted infection other than HIV | 1 |
| 6 | Some other service | 21 |
| 8 | Refused | 1 |
| | Total | 4815 |

Universe: Applicable if R reported ever receiving family planning services from a family planning clinic in the last 12 months (IB-2 WHENGOFP =1)

YOUFPSVC2(3788-3788)

Variable Type: raw

IB-3: Please look again at Card 69. Which of these services did you receive at that visit? (2ND MENTION)

| value | label | Total |
|-------|---|-------|
| | INAPPLICABLE | 4640 |
| 1 | Physical exam | 6 |
| 2 | Information or advice on birth control methods, including condoms | 43 |
| 3 | HIV testing | 63 |
| 4 | Testing for sexually transmitted infection other than HIV | 46 |
| 5 | Treatment for sexually transmitted infection other than HIV | 1 |
| 6 | Some other service | 16 |
| | | |

Total 4815

Universe: Applicable if reported receiving more than 1 service at a family planning clinic in the last 12 months (See IB-3 YOUFPSVC1)

YOUFPSVC3(3789-3789)

Variable Type: raw

IB-3: Please look again at Card 69. Which of these services did youreceive at that visit? (3RD MENTION)

| value | label | Total |
|-------|---|-------|
| | INAPPLICABLE | 4719 |
| 1 | Physical exam | 6 |
| 2 | Information or advice on birth control methods, including condoms | 9 |
| 3 | HIV testing | 29 |
| 4 | Testing for sexually transmitted infection other than HIV | 39 |
| 5 | Treatment for sexually transmitted infection other than HIV | 10 |
| 6 | Some other service | 3 |
| | Total | 4815 |

Universe : Applicable if reported receiving more than 2 services at a family the last 12 months (See IB-3 YOUFPSVC1)

YOUFPSVC4(3790-3790)

Variable Type: raw

IB-3: Please look again at Card 69. Which of these services did you receive at that visit? (4TH MENTION)

| value | label | Total |
|-------|---|-------|
| | INAPPLICABLE | 4772 |
| 1 | Physical exam | 4 |
| 2 | Information or advice on birth control methods, including condoms | 2 |
| 3 | HIV testing | 1 |
| 4 | Testing for sexually transmitted infection other than HIV | 22 |
| 5 | Treatment for sexually transmitted infection other than HIV | 6 |
| 6 | Some other service | 8 |
| | Total | 4815 |

Universe : Applicable if reported receiving more than 3 services at a family planning clinic in the last 12 months (See IB-3 YOUFPSVC1)

YOUFPSVC5(3791-3791)

Variable Type: raw

IB-3: Please look again at Card 69. Which of these services did you receive at that visit? (5TH MENTION)

| value | label | Total |
|-------|---|-------|
| . | INAPPLICABLE | 4804 |
| 5 | Treatment for sexually transmitted infection other than HIV | 6 |
| 6 | Some other service | 5 |
| | Total | 4815 |

Universe: Applicable if reported receiving more than 4 services at a family planning clinic in the last 12 months (See IB-3 YOUFPSVC1)

Male Respondent File Codebook :: SECTION I: Health Conditions and Health Services :: (IC) Health problems or impairments; Cancer

DEAF(3792-3792)

IC-1: Do you have serious difficulty hearing?

| val | ue label | Total |
|-----|----------|-------|
| 1 | Yes | 180 |
| 5 | No | 4635 |
| | Total | 4815 |

Universe: Applicable for all respondents

BLIND(3793-3793)

Variable Type: raw

IC-2: Do you have serious difficulty seeing, even when wearing glasses or contact lenses?

| val | ue label | Total |
|-----|----------|-------|
| 1 | Yes | 175 |
| 5 | No | 4640 |
| | Total | 4815 |

Universe: Applicable for all respondents

DIFDECIDE(3794-3794)

Variable Type: raw

IC-3 : Because of a physical, mental, or emotional condition, do you have serious difficulty concentrating, remembering or making decisions?

| value | label | Total |
|-------|------------|-------|
| 1 | Yes | 525 |
| 5 | No | 4287 |
| 8 | Refused | 1 |
| 9 | Don't know | 2 |
| | Total | 4815 |

Universe: Applicable for all respondents

DIFWALK(3795-3795)

Variable Type: raw

IC-4: Do you have serious difficulty walking or climbing stairs?

| value | label | Total |
|-------|------------|-------|
| 1 | Yes | 167 |
| 5 | No | 4647 |
| 9 | Don't know | 1 |
| | Total | 4815 |

Universe: Applicable for all respondents

DIFDRESS(3796-3796)

Variable Type: raw

IC-5 : Do you have difficulty dressing or bathing?

| valu | ue label | Total |
|------|----------|-------|
| 1 | Yes | 50 |
| 5 | No | 4765 |
| | Total | 4815 |

Universe: Applicable for all respondents

DIFOUT(3797-3797)

Variable Type: raw

IC-6 : Because of a physical, mental, or emotional condition, do you have difficulty doing errands alone such as visiting a doctor's office or shopping?

| value | label | Total |
|-------|---------|-------|
| 1 | Yes | 136 |
| 5 | No | 4677 |
| 8 | Refused | 2 |
| | Total | 4815 |

Universe: Applicable for all respondents

EVRCANCER(3798-3798)

Variable Type: raw

IC-7 : Now I would like to ask you about cancer. Have you <u>ever</u> been told by a doctor or other health care provider that you had cancer?

| value | label | Total |
|-------|------------|-------|
| 1 | Yes | 57 |
| 5 | No | 4756 |
| 8 | Refused | 1 |
| 9 | Don't know | 1 |
| | Total | 4815 |

Universe: Applicable for all respondents

AGECANCER(3799-3800)

Variable Type: raw

IC-7a: At what age were you first told that you had cancer?

| value | label | Total |
|-------|---------------|-------|
| | INAPPLICABLE | 4758 |
| 0-17 | UNDER18 YEARS | 17 |
| 18-24 | 18-24 YEARS | 16 |
| 25-44 | 25-44 YEARS | 23 |
| 99 | Don't know | 1 |
| | Total | 4815 |

Universe: Applicable if R reported ever had cancer (IC-7 EVRCANCER =1)

CANCTYPE(3801-3802)

Variable Type : raw

IC-7b: What type of cancer was it? If you had cancer more than once, please say what your first cancer was.

| value | label | Total |
|-------|---|-------|
| | INAPPLICABLE | 4758 |
| 2 | Bone cancer | 2 |
| 6 | Colon cancer | 2 |
| 8 | Head and neck cancer | 1 |
| 10 | Leukemia/blood cancer | 5 |
| 12 | Lung cancer | 1 |
| 13 | Lymphoma including Hodgkins disease/Lymphoma and non-Hodgkins lymphomas | 8 |
| 14 | Melanoma | 18 |
| 15 | Neuroblastoma | 1 |
| 19 | Pharyngeal (throat) cancer | 1 |

| 20 | Prostate cancer | 3 |
|----|-------------------|------|
| 24 | Thyroid cancer | 1 |
| 25 | Other | 2 |
| 26 | Testicular cancer | 12 |
| | Total | 4815 |

Universe: Applicable if R reported ever had cancer (IC-7 EVRCANCER =1)

Male Respondent File Codebook :: SECTION I: Health Conditions and Health Services :: (ID) Health services

VISIT12MO1(3803-3803)

Variable Type: raw

ID-1: Please look at card 69a. In the past 12 months, that is, since (INTERVIEW MONTH, INTERVIEW YEAR-1), did you have any of these types of visits to a doctor or health care provider? (1st MENTION)

| value | label | Total |
|-------|---|-------|
| 1 | A routine physical exam | 1604 |
| 2 | A physical exam for sports or work | 576 |
| 3 | A doctor visit when you were sick or hurt | 1187 |
| 4 | Did not have any visits to a doctor | 1445 |
| 8 | Refused | 1 |
| 9 | Don't know | 2 |
| | Total | 4815 |

Universe: Applicable for all respondents

VISIT12MO2(3804-3804)

Variable Type : raw

ID-1 : Please look at card 69a. In the past 12 months, that is, since (INTERVIEW MONTH, INTERVIEW YEAR-1), did you have any of these types of visits to a doctor or health care provider ? (2nd MENTION)

| value | label | Total |
|-------|---|-------|
| | INAPPLICABLE | 3667 |
| 1 | A routine physical exam | 102 |
| 2 | A physical exam for sports or work | 342 |
| 3 | A doctor visit when you were sick or hurt | 704 |
| | Total | 4815 |

Universe : Applicable if reported more than 1 type of visit to a doctor in past 12 months (See ID-1 VISIT12MO1)

VISIT12MO3(3805-3805)

Variable Type: raw

ID-1: Please look at card 69a. In the past 12 months, that is, since (INTERVIEW MONTH, INTERVIEW YEAR-1), did you have any of these types of visits to a doctor or health care provider? (3rd MENTION)

| value | label | Total |
|-------|---|-------|
| | INAPPLICABLE | 4591 |
| 1 | A routine physical exam | 7 |
| 2 | A physical exam for sports or work | 7 |
| 3 | A doctor visit when you were sick or hurt | 210 |
| | Total | 4815 |

Universe : Applicable if reported more than 2 types of visit to a doctor in past 12 months (See ID-1 VISIT12MO1)

VISIT12MO4(3806-3806)

Variable Type: raw

ID-1: Please look at card 69a. In the past 12 months, that is, since (INTERVIEW MONTH, INTERVIEW YEAR-1), did you have any of these types of visits to a doctor or health care provider? (4th MENTION)

| value | label | Total |
|-------|--------------|-------|
| - | INAPPLICABLE | 4815 |
| | Total | 4815 |

Universe : Applicable if reported more than 3 types of visit to a doctor in past 12 months (See ID-1 VISIT12MO1)

SVC12MO1(3807-3808)

Variable Type: raw

ID-2: Please look at Card 69b. Did you receive any of the services shown on this card at those visits in the past 12 months? (1st MENTION)

| valu | label | Total |
|------|--|-------|
| | INAPPLICABLE | 1448 |
| 1 | A testicular exam (had your testicles examined) | 772 |
| 2 | Testing for sexually transmitted disease | 272 |
| 3 | Treatment for sexually transmitted disease | 15 |
| 4 | Information or advice about using condoms | 30 |
| 5 | Information or advice about your partner using female methods of birth control | 15 |
| 6 | Information or advice about you getting a vasectomy (surgically sterilized) | 14 |
| 7 | Information or advice about HIV or AIDS | 44 |
| 8 | Information or advice about other sexually transmitted infections, such as gonorrhea, Chlamydia, syphilis, or genital herpes | 10 |
| 9 | None of the above | 2189 |
| 98 | Refused | 4 |
| 99 | Don't know | 2 |
| | Total | 4815 |

Universe: Applicable if had a visit to a doctor or health care provider in the past 12 months (VISIT12MO1 =1,2,3) (1st MENTION)

SVC12MO2(3809-3809)

Variable Type: raw

ID-2 : Please look at Card 69b. Did you receive any of the services shown on this card at those visits in the past 12 months? (2nd MENTION)

| value | label | Total |
|-------|--|-------|
| | INAPPLICABLE | 4346 |
| 1 | A testicular exam (had your testicles examined) | 16 |
| 2 | Testing for sexually transmitted disease | 231 |
| 3 | Treatment for sexually transmitted disease | 27 |
| 4 | Information or advice about using condoms | 69 |
| 5 | Information or advice about your partner using female methods of birth control | 16 |
| 6 | Information or advice about you getting a vasectomy (surgically sterilized) | 16 |
| 7 | Information or advice about HIV or AIDS | 65 |
| 8 | Information or advice about other sexually transmitted infections, such as gonorrhea, Chlamydia, syphilis, or genital herpes | 29 |
| | Total | 4815 |

Universe: Applicable if R reported more than 1 service in the past 12 months (See ID-2 SVC12MO1)

SVC12MO3(3810-3810)

ID-2: Please look at Card 69b. Did you receive any of the services shown on this card at those visits in the past 12 months? (3rd MENTION)

| value | label | Total |
|-------|---|-------|
| ļ | INAPPLICABLE | 4585 |
| 1 | A testicular exam (had your testicles examined) | 3 |
| 2 | Testing for sexually transmitted disease | 3 |
| 3 | Treatment for sexually transmitted disease | 32 |
| 4 | Information or advice about using condoms | 51 |
| 5 | Information or advice about your partner using female methods of birth control | 34 |
| 6 | Information or advice about you getting a vasectomy (surgically sterilized) | 8 |
| 7 | Information or advice about HIV or AIDS | 56 |
| 8 | $Information\ or\ advice\ about\ other\ sexually\ transmitted\ infections,\ such\ as\ gonorrhea,\ Chlamydia,\ syphilis,\ or\ genital\ herpes$ | 43 |
| | Total | 4815 |

Universe: Applicable if R reported more than 2 service in the past 12 months (See ID-2 SVC12MO1)

SVC12MO4(3811-3811)

Variable Type: raw

ID-2 : Please look at Card 69b. Did you receive any of the services shown on this card at those visits in the past 12 months? (4th MENTION)

| value | label | Total |
|-------|--|-------|
| | INAPPLICABLE | 4684 |
| 1 | A testicular exam (had your testicles examined) | 1 |
| 3 | Treatment for sexually transmitted disease | 1 |
| 4 | Information or advice about using condoms | 16 |
| 5 | Information or advice about your partner using female methods of birth control | 27 |
| 6 | Information or advice about you getting a vasectomy (surgically sterilized) | 3 |
| 7 | Information or advice about HIV or AIDS | 46 |
| 8 | Information or advice about other sexually transmitted infections, such as gonorrhea, Chlamydia, syphilis, or genital herpes | 37 |
| | Total | 4815 |

Universe: Applicable if R reported more than 3 service in the past 12 months (See ID-2 SVC12MO1)

SVC12MO5(3812-3812)

Variable Type: raw

ID-2: Please look at Card 69b. Did you receive any of the services shown on this card at those visits in the past 12 months? (5th MENTION)

| value | label | Total |
|-------|---|-------|
| | INAPPLICABLE | 4739 |
| 2 | Testing for sexually transmitted disease | 2 |
| 3 | Treatment for sexually transmitted disease | 2 |
| 5 | Information or advice about your partner using female methods of birth control | 8 |
| 6 | Information or advice about you getting a vasectomy (surgically sterilized) | 8 |
| 7 | Information or advice about HIV or AIDS | 27 |
| 8 | $Information\ or\ advice\ about\ other\ sexually\ transmitted\ infections,\ such\ as\ gonorrhea,\ Chlamydia,\ syphilis,\ or\ genital\ herpes$ | 29 |
| | Total | 4815 |

Universe: Applicable if R reported more than 4 service in the past 12 months (See ID-2 SVC12MO1)

SVC12MO6(3813-3813)

Variable Type: raw

ID-2: Please look at Card 69b. Did you receive any of the services shown on this card at those visits in the past 12 months? (6th MENTION)

| value | label | Total |
|-------|--|-------|
| | INAPPLICABLE | 4782 |
| 6 | Information or advice about you getting a vasectomy (surgically sterilized) | 6 |
| 7 | Information or advice about HIV or AIDS | 7 |
| 8 | Information or advice about other sexually transmitted infections, such as gonorrhea, Chlamydia, syphilis, or genital herpes | 20 |
| | Total | 4815 |

Universe: Applicable if R reported more than 5 service in the past 12 months (See ID-2 SVC12MO1)

SVC12MO7(3814-3814)

Variable Type: raw

ID-2 : Please look at Card 69b. Did you receive any of the services shown on this card at those visits in the past 12 months? (7th MENTION)

| value | label | Total |
|-------|--|-------|
| | INAPPLICABLE | 4802 |
| 7 | Information or advice about HIV or AIDS | 6 |
| 8 | Information or advice about other sexually transmitted infections, such as gonorrhea, Chlamydia, syphilis, or genital herpes | 7 |
| | Total | 4815 |

Universe: Applicable if R reported more than 6 service in the past 12 months (See ID-2 SVC12MO1)

SVC12MO8(3815-3815)

Variable Type: raw

ID-2: Please look at Card 69b. Did you receive any of the services shown on this card at those visits in the past 12 months? (8th MENTION)

| value | label | Total |
|-------|--|-------|
| - | INAPPLICABLE | 4810 |
| 8 | Information or advice about other sexually transmitted infections, such as gonorrhea, Chlamydia, syphilis, or genital herpes | 5 |
| | Total | 4815 |

Universe: Applicable if R reported more than 7 service in the past 12 months (See ID-2 SVC12MO1)

NUMVISIT(3816-3817)

Variable Type: raw

ID-3 : How many visits did you have in the last 12 months in order to receive these services from a doctor or other medical care provider?

| value | label | Total |
|-------|------------------|-------|
| | INAPPLICABLE | 1448 |
| 1 | 1 VISIT | 1538 |
| 2 | 2 VISITS | 809 |
| 3 | 3 VISITS | 381 |
| 4 | 4 VISITS | 230 |
| 5-95 | 5 OR MORE VISITS | 373 |
| 98 | Refused | 1 |
| 99 | Don't know | 35 |
| | Total | 4815 |

Universe : Applicable if had a visit to a doctor or health care provider in the past 12 months (VISIT12MO1 =1,2,3)

PLACEVIS01(3818-3819)

ID-4: Please look at Card 25a. What place or places did you go for these service(s)? (1st MENTION)

| value | label | Total |
|-------|---|-------|
| | INAPPLICABLE | 1448 |
| 1 | Private doctor's office or HMO | 1875 |
| 2 | Community health clinic, community clinic, public health clinic | 527 |
| 3 | Family planning or Planned Parenthood Clinic | 49 |
| 4 | Employer or company clinic | 160 |
| 5 | School or school-based clinic | 66 |
| 6 | Hospital outpatient clinic | 105 |
| 7 | Hospital emergency room | 214 |
| 8 | Hospital regular room | 88 |
| 9 | Urgent care center, urgi-care, or walk-in facility | 168 |
| 10 | Sexually transmitted disease (STD) clinic | 11 |
| 20 | Some other place | 90 |
| 98 | Refused | 1 |
| 99 | Don't know | 13 |
| | Total | 4815 |

Universe: Applicable if had a visit to a doctor or health care provider in the past 12 months (VISIT12MO1 =1,2,3)

PLACEVIS02(3820-3821)

Variable Type: raw

ID-4: Please look at Card 25a. What place or places did you go for these service(s)? (2nd MENTION)

| value | label | Total |
|-------|---|-------|
| | INAPPLICABLE | 4360 |
| 1 | Private doctor's office or HMO | 47 |
| 2 | Community health clinic, community clinic, public health clinic | 50 |
| 3 | Family planning or Planned Parenthood Clinic | 16 |
| 4 | Employer or company clinic | 34 |
| 5 | School or school-based clinic | 21 |
| 6 | Hospital outpatient clinic | 44 |
| 7 | Hospital emergency room | 111 |
| 8 | Hospital regular room | 34 |
| 9 | Urgent care center, urgi-care, or walk-in facility | 63 |
| 10 | Sexually transmitted disease (STD) clinic | 7 |
| 20 | Some other place | 28 |
| | Total | 4815 |

Universe : Applicable if R reported more than 1 type of place where received medical services (See ID-4 PLACEVIS01)

PLACEVIS03(3822-3823)

ID-4: Please look at Card 25a. What place or places did you go for these service(s)? (3rd MENTION)

| value | label | Total |
|-------|---|-------|
| | INAPPLICABLE | 4720 |
| 1 | Private doctor's office or HMO | 2 |
| 2 | Community health clinic, community clinic, public health clinic | 4 |
| 3 | Family planning or Planned Parenthood clinic | 2 |
| 4 | Employer or company clinic | 2 |
| 5 | School or school-based clinic | 8 |
| 6 | Hospital outpatient clinic | 10 |
| 7 | Hospital emergency room | 22 |
| 8 | Hospital regular room | 23 |
| | | |

| 9 | Urgent care center, urgi-care, or walk-in facility | 13 |
|----|--|------|
| 10 | Sexually transmitted disease (STD) clinic | 5 |
| 20 | Some other place | 4 |
| | Total | 4815 |

Universe: Applicable if R reported more than 2 types of places where received medical services (See ID-4 PLACEVIS01)

PLACEVIS04(3824-3825)

Variable Type: raw

ID-4: Please look at Card 25a. What place or places did you go for these service(s)? (4th MENTION)

| value | label | Total |
|-------|--|-------|
| | INAPPLICABLE | 4794 |
| 6 | Hospital outpatient clinic | 5 |
| 7 | Hospital emergency room | 3 |
| 8 | Hospital regular room | 3 |
| 9 | Urgent care center, urgi-care, or walk-in facility | 4 |
| 10 | Sexually transmitted disease (STD) clinic | 2 |
| 20 | Some other place | 4 |
| | Total | 4815 |

Universe: Applicable if R reported more than 3 types of places where received medical services (See ID-4 PLACEVIS01)

PLACEVIS05(3826-3827)

Variable Type: raw

ID-4: Please look at Card 25a. What place or places did you go for these service(s)? (5th MENTION)

| value | label | Total |
|-------|--|-------|
| | INAPPLICABLE | 4807 |
| 1 | Private doctor's office or HMO | 2 |
| 8 | Hospital regular room | 1 |
| 9 | Urgent care center, urgi-care, or walk-in facility | 3 |
| 20 | Some other place | 2 |
| | Total | 4815 |

Universe: Applicable if R reported more than 4 types of places where received medical services (See ID-4 PLACEVIS01)

PLACEVIS06(3828-3828)

Variable Type: raw

ID-4: Please look at Card 25a. What place or places did you go for these service(s)? (6th MENTION)

| value | label | Total |
|-------|--|-------|
| . | INAPPLICABLE | 4814 |
| 9 | Urgent care center, urgi-care, or walk-in facility | 1 |
| | Total | 4815 |

Universe: Applicable if R reported more than 5 types of places where received medical services (See ID-4 PLACEVIS01)

SVCPAY1(3829-3829)

Variable Type: raw

ID-5 : Please look at Card 16a. In which of the ways shown on this card was the bill for these visits paid? (1st MENTION)

| value | label | Total |
|-------|---|-------|
| | INAPPLICABLE | 1448 |
| 1 | Insurance | 1863 |
| 2 | Co-payment | 362 |
| 3 | Out-of-pocket payment (not including copay) | 441 |
| 4 | Medicaid | 407 |
| 5 | No payment required | 154 |
| 6 | Some other way | 58 |
| 8 | Refused | 6 |
| 9 | Don't know | 76 |
| | Total | 4815 |

Universe: Applicable if had a visit to a doctor or health care provider in the past 12 months (VISIT12MO1 =1,2,3)

SVCPAY2(3830-3830)

Variable Type: raw

ID-5 : Please look at Card 16a. In which of the ways shown on this card was the bill for these visits paid? (2nd MENTION)

| value | label | Total |
|-------|---|-------|
| | INAPPLICABLE | 3473 |
| 1 | Insurance | 183 |
| 2 | Co-payment | 1018 |
| 3 | Out-of-pocket payment (not including copay) | 73 |
| 4 | Medicaid | 34 |
| 5 | No payment required | 22 |
| 6 | Some other way | 12 |
| | Total | 4815 |

Universe: Applicable if R reported more than 1 type of payment for medical services (See ID-5 SVCPAY1)

SVCPAY3(3831-3831)

Variable Type: raw

 ${\tt ID-5}$: Please look at Card 16a. In which of the ways shown on this card was the bill for these visits paid? (3rd MENTION)

| value | label | Total |
|-------|---|-------|
| | INAPPLICABLE | 4710 |
| 1 | Insurance | 2 |
| 2 | Co-payment | 4 |
| 3 | Out-of-pocket payment (not including copay) | 72 |
| 4 | Medicaid | 4 |
| 5 | No payment required | 17 |
| 6 | Some other way | 6 |
| | Total | 4815 |

Universe: Applicable if R reported more than 2 types of payment for medical services (See ID-5 SVCPAY1)

SVCPAY4(3832-3832)

Variable Type: raw

ID-5 : Please look at Card 16a. In which of the ways shown on this card was the bill for these visits paid? (4th MENTION)

| value | label | Total |
|-------|--------------|-------|
| | INAPPLICABLE | 4812 |
| 4 | Medicaid | 1 |

| 5 | No payment required | 1 |
|---|---------------------|------|
| 6 | Some other way | 1 |
| | Total | 4815 |

Universe: Applicable if R reported more than 3 type of payment for medical services (See ID-5 SVCPAY1)

SVCPAY5(3833-3833)

Variable Type: raw

ID-5 : Please look at Card 16a. In which of the ways shown on this card was the bill for these visits paid? (5th MENTION)

| value | label | Total |
|-------|---------------------|-------|
| | INAPPLICABLE | 4814 |
| 5 | No payment required | 1 |
| | Total | 4815 |

Universe: Applicable if R reported more than 4 type of payment for medical services (See ID-5 SVCPAY1)

TALKSA(3834-3834)

Variable Type: raw

ID-6 : During your visit(s) in the past 12 months did a doctor or health care provider ask you if you were sexually active?

| value | label | Total |
|-------|--|-------|
| ļ. | INAPPLICABLE | 1448 |
| 1 | Yes | 1280 |
| 5 | No | 2072 |
| 7 | If vol: Provider already knew R's status | 4 |
| 8 | Refused | 1 |
| 9 | Don't know | 10 |
| | Total | 4815 |

Universe: Applicable if had a visit to a doctor or health care provider in the past 12 months (VISIT12MO1 =1,2,3)

TALKEC(3835-3835)

Variable Type: raw

ID-7: During your visit in the past 12 months, did a doctor or health care provider talk with you about emergency contraception?

| value | label | Total |
|-------|--------------|-------|
| | INAPPLICABLE | 1448 |
| 1 | Yes | 192 |
| 5 | No | 3173 |
| 8 | Refused | 1 |
| 9 | Don't know | 1 |
| | Total | 4815 |

Universe : Applicable if had a visit to a doctor or health care provider in the past 12 months (VISIT12MO1 =1,2,3)

TALKDM(3836-3836)

Variable Type: raw

ID-8: During your visit in the past 12 months, did a doctor or health care provider talk with you about using a condom at the same time as a female method of contraception?

| value | label | Total |
|-------|--------------|-------|
| . | INAPPLICABLE | 1448 |
| 1 | Yes | 406 |
| 5 | No | 2959 |
| 8 | Refused | 1 |
| 9 | Don't know | 1 |
| | Total | 4815 |

Universe: Applicable if had a visit to a doctor or health care provider in the past 12 months (VISIT12MO1 =1,2,3)

BARRIER1(3837-3838)

Variable Type: raw

ID-9: You reported that you did not go to a doctor in the past 12 months. Please look at Card 69c. Which of the reasons shown on this card explain why you did not see a doctor? (1st MENTION)

| value | label | Total |
|-------|---|-------|
| | INAPPLICABLE | 3370 |
| 1 | I did not need to see a doctor in the last year | 1190 |
| 2 | I did not know where to go for care | 13 |
| 3 | I could not afford to pay for a visit | 155 |
| 4 | I was afraid to hear bad news | 15 |
| 5 | I had privacy/confidentiality concerns | 1 |
| 6 | I could not take time off from work | 35 |
| 20 | Something else -not shown separately | 34 |
| 98 | Refused | 2 |
| | Total | 4815 |

Universe: Applicable if did not have a visit to a doctor or health care provider in the past 12 months (VISIT12MO1 = 4)

BARRIER2(3839-3840)

Variable Type: raw

ID-9: You reported that you did not go to a doctor in the past 12 months. Please look at Card 69c. Which of the reasons shown on this card explain why you did not see a doctor? (2nd MENTION)

| value | label | Total |
|-------|---|-------|
| | INAPPLICABLE | 4647 |
| 1 | I did not need to see a doctor in the last year $% \left\{ 1,2,\ldots \right\}$ | 21 |
| 2 | I did not know where to go for care | 15 |
| 3 | I could not afford to pay for a visit | 77 |
| 4 | I was afraid to hear bad news | 21 |
| 5 | I had privacy/confidentiality concerns | 2 |
| 6 | I could not take time off from work | 19 |
| 20 | Something else -not shown separately | 13 |
| | Total | 4815 |

Universe: Applicable if R reported more than 1 reason for not having a visit to a doctor or health care provider in the past 12 months (See ID-9 BARRIER1)

BARRIER3(3841-3842)

Variable Type: raw

ID-9: You reported that you did not go to a doctor in the past 12 months. Please look at Card 69c. Which of the reasons shown on this card explain why you did not see a doctor? (3rd MENTION)

| value | label | Total |
|-------|--------------|-------|
| | INAPPLICABLE | 4777 |

| 1 | I did not need to see a doctor in the last year | 1 |
|----|---|------|
| 2 | I did not know where to go for care | 1 |
| 3 | I could not afford to pay for a visit | 13 |
| 4 | I was afraid to hear bad news | 9 |
| 5 | I had privacy/confidentiality concerns | 2 |
| 6 | I could not take time off from work | 7 |
| 20 | Something else-not shown separately | 5 |
| | Total | 4815 |

Universe: Applicable if R reported more than 2 reason for not having a visit to a doctor or health care provider in the past 12 months (See ID-9 BARRIER1)

BARRIER4(3843-3844)

Variable Type: raw

ID-9: You reported that you did not go to a doctor in the past 12 months. Please look at Card 69c. Which of the reasons shown on this card explain why you did not see a doctor? (4th MENTION)

| value | label | Total |
|-------|--|-------|
| | INAPPLICABLE | 4807 |
| 4 | I was afraid to hear bad news | 4 |
| 5 | I had privacy/confidentiality concerns | 1 |
| 6 | I could not take time off from work | 2 |
| 20 | Something else -not shown separately | 1 |
| | Total | 4815 |

Universe: Applicable if R reported more than 3 reason for not having a visit to a doctor or health care provider in the past 12 months (See ID-9 BARRIER1)

BARRIER5(3845-3845)

Variable Type: raw

ID-9: You reported that you did not go to a doctor in the past 12 months. Please look at Card 69c. Which of the reasons shown on this card explain why you did not see a doctor? (5th MENTION)

| value | label | Total |
|-------|-------------------------------------|-------|
| | INAPPLICABLE | 4814 |
| 6 | I could not take time off from work | 1 |
| | Total | 4815 |

Universe: Applicable if R reported more than 4 reason for not having a visit to a doctor or health care provider in the past 12 months (See ID-9 BARRIER1)

Male Respondent File Codebook :: SECTION I: Health Conditions and Health Services :: (IE) Infertility services

INFHELP(3846-3846)

Variable Type: raw

IE-1: (During any of your relationships,) (Have/Did) you or your (wife/partner) (at the time) ever (been/go) to a doctor or other medical care provider to talk about ways to help you have a baby together?

| value | label | Total |
|-------|--------------|-------|
| | INAPPLICABLE | 769 |
| 1 | Yes | 218 |
| 5 | No | 3827 |
| 8 | Refused | 1 |
| | Total | 4815 |

Universe: Applicable if R reported ever had sex (RHADSEX =1)

Notes: use recode INFEVER

INFSVCS1(3847-3847)

Variable Type: raw

IE-2: Which of the services shown on Card 70 (did / have) you or your (wife/partner) (have / had) to help you have a baby together? (1st MENTION)

| value | label | Total |
|-------|----------------------------------|-------|
| ļ. | INAPPLICABLE | 4597 |
| 1 | Advice | 159 |
| 2 | Infertility testing | 37 |
| 3 | Drugs to improve ovulation | 12 |
| 4 | Surgery to correct blocked tubes | 1 |
| 6 | Treatment for varicocele | 1 |
| 7 | Other types of medical help | 8 |
| | Total | 4815 |

Universe: Applicable if R reported ever going to a doctor (with wife/partner) to talk about ways to help them have a baby together (IE-1 INFHELP =1)

INFSVCS2(3848-3848)

Variable Type: raw

IE-2: Which of the services shown on Card 70 (did / have) you or your (wife/partner) (have / had) to help you have a baby together? (2nd MENTION)

| value | label | Total |
|-------|----------------------------------|-------|
| | INAPPLICABLE | 4683 |
| 1 | Advice | 11 |
| 2 | Infertility testing | 82 |
| 3 | Drugs to improve ovulation | 25 |
| 4 | Surgery to correct blocked tubes | 5 |
| 5 | Artificial insemination | 5 |
| 6 | Treatment for varicocele | 1 |
| 7 | Other types of medical help | 3 |
| | Total | 4815 |

Universe: Applicable if R reported more than 1 service he and (wife/partner) received from a doctor to help them have a baby together (See IE-2 INFSVCS1)

INFSVCS3(3849-3849)

Variable Type: raw

IE-2: Which of the services shown on Card 70 (did / have) you or your (wife/partner) (have / had) to help you have a baby together? (3rd MENTION)

| value | label | Total |
|-------|----------------------------------|-------|
| | INAPPLICABLE | 4741 |
| 1 | Advice | 1 |
| 2 | Infertility testing | 2 |
| 3 | Drugs to improve ovulation | 46 |
| 4 | Surgery to correct blocked tubes | 5 |
| 5 | Artificial insemination | 8 |
| 6 | Treatment for varicocele | 3 |
| 7 | Other types of medical help | 9 |
| | Total | 4815 |

Universe: Applicable if R reported more than 2 services he and (wife/partner) received from a doctor to help them have a baby together (See IE-2 INFSVCS1)

INFSVCS4(3850-3850)

Variable Type: raw

IE-2: Which of the services shown on Card 70 (did / have) you or your (wife/partner) (have / had) to help you have a baby together? (4th MENTION)

| value | label | Total |
|-------|----------------------------------|-------|
| | INAPPLICABLE | 4789 |
| 3 | Drugs to improve ovulation | 1 |
| 4 | Surgery to correct blocked tubes | 5 |
| 5 | Artificial insemination | 12 |
| 6 | Treatment for varicocele | 2 |
| 7 | Other types of medical help | 6 |
| | Total | 4815 |

Universe: Applicable if R reported more than 3 services he and (wife/partner) received from a doctor to help them have a baby together (See IE-2 INFSVCS1)

INFSVCS5(3851-3851)

Variable Type: raw

IE-2: Which of the services shown on Card 70 (did / have) you or your (wife/partner) (have / had) to help you have a baby together? (5th MENTION)

| value | label | Total |
|-------|----------------------------------|-------|
| . | INAPPLICABLE | 4808 |
| 4 | Surgery to correct blocked tubes | 1 |
| 5 | Artificial insemination | 2 |
| 6 | Treatment for varicocele | 3 |
| 7 | Other types of medical help | 1 |
| | Total | 4815 |

Universe: Applicable if R reported more than 4 services he and (wife/partner) received from a doctor to help them have a baby together (See IE-2 INFSVCS1)

INFSVCS6(3852-3852)

Variable Type: raw

IE-2: Which of the services shown on Card 70 (did / have) you or your (wife/partner) (have / had) to help you have a baby together? (6th MENTION)

| value | label | Total |
|-------|-----------------------------|-------|
| . | INAPPLICABLE | 4811 |
| 7 | Other types of medical help | 4 |
| | Total | 4815 |

Universe: Applicable if R reported more than 5 services he and (wife/partner) received from a doctor to help them have a baby together (See IE-2 INFSVCS1)

INFTEST(3853-3853)

Variable Type: raw

IE-3: Who was it that had infertility testing? Was it you, her, or both of you?

| value | label | Total |
|-------|--------------|-------|
| | INAPPLICABLE | 4694 |
| 1 | You | 23 |
| 2 | Her | 24 |
| 3 | Both of you | 74 |
| | Total | 4815 |

Universe: Applicable if infertility testing was mentioned (IE-2 INFSVCS1 - IE-2 INFSVCS6 = 2)

WHOINSEM(3854-3854)

Variable Type: raw

IE-4: Was your wife or partner inseminated with sperm from you only, from some other donor only, or from both?

| value | label | Total |
|-------|-----------------------|-------|
| | INAPPLICABLE | 4788 |
| 1 | You only | 25 |
| 2 | Some other donor only | 1 |
| 9 | Don't know | 1 |
| | Total | 4815 |

Universe: Applicable if artificial insemination was mentioned (IE-2 INFSVCS1 - IE-2 INFSVCS6 = 5)

INFHLPNW(3855-3855)

Variable Type: raw

IE-5 : Are you and your (wife/partner) currently pursuing medical help to have a baby together?

| value | label | Total |
|-------|--------------|-------|
| | INAPPLICABLE | 4641 |
| 1 | Yes | 20 |
| 5 | No | 153 |
| 9 | Don't know | 1 |
| | Total | 4815 |

Universe: Applicable if currently married or cohabiting (AB-1 MARSTAT = 1 or 2) and R reported ever receiving any infertility services (IE-1 INFHELP = 1)

LASTVIS_M(3856-3857)

Variable Type: raw

IE-6m: In what month and year was your (<u>last/most recent</u>) visit for medical help to have a baby together? (MONTH)

| value | label | Total |
|-------|------------------|-------|
| | INAPPLICABLE | 4597 |
| 1-12 | January-December | 167 |
| 13 | Winter | 7 |
| 14 | Spring | 11 |
| 15 | Summer | 13 |
| 16 | Fall | 5 |
| 98 | Refused | 1 |
| 99 | Don't know | 14 |
| | Total | 4815 |

Universe: Applicable if R reported ever going to a doctor (with wife/partner) to talk about ways to help them have a baby together (IE-1 INFHELP =1)

LASTVIS_Y(3858-3861)

Variable Type: raw

IE-6y: In what month and year was your (<u>last/most recent</u>) visit for medical help to have a baby together? (YEAR)

| value | label | Total |
|-------|-------|-------|
| | | |

| ļ. | INAPPLICABLE | 4597 |
|---------------|--------------|------|
| 1931- 2013 | 1931-2013 | 212 |
| 9998 | Refused | 1 |
| 9999 | Don't know | 5 |
| | Total | 4815 |

Universe : Applicable if R reported ever going to a doctor (with wife/partner) to talk about ways to help them have a baby together (IE-1 INFHELP =1)

cminfvis(3862-3865)

Variable Type: computed

Description: Century Month of last/most recent infertility service visit (Computed in Flow Check I-9)

| value | label | Total |
|-----------|---------------------|-------|
| | INAPPLICABLE | 4597 |
| 380-1340 | Before Sept 2011 | 163 |
| 1341-1352 | Sept 2011-Aug 2012 | 34 |
| 1353-1365 | Sept 2012-Sept 2013 | 15 |
| 9998 | Refused | 1 |
| 9999 | Don't know | 5 |
| | Total | 4815 |

Universe : Applicable if R reported ever going to a doctor (with wife/partner) to talk about ways to help them have a baby together (IE-1 INFHELP = 1)

INFRTHIS1(3866-3866)

Variable Type: raw

IE-7: When you and your wife or partner went for medical help to have a baby together, were you ever told that you had any of the following male infertility problems shown on Card 71? (1ST MENTION)

| value | label | Total |
|-------|-------------------------|-------|
| | INAPPLICABLE | 4597 |
| 1 | Sperm or semen problems | 37 |
| 2 | Varicocele | 5 |
| 3 | Other | 6 |
| 4 | None of the above | 170 |
| | Total | 4815 |

Universe: Applicable if R reported ever going to a doctor (with wife/partner) to talk about ways to help them have a baby together (IE-1 INFHELP =1)

INFRTHIS2(3867-3867)

Variable Type: raw

IE-7: When you and your wife or partner went for medical help to have a baby together, were you ever told that you had any of the following male infertility problems shown on Card 71? (2ND MENTION)

| value | label | Total |
|-------|-------------------------|-------|
| | INAPPLICABLE | 4807 |
| 1 | Sperm or semen problems | 3 |
| 2 | Varicocele | 3 |
| 3 | Other | 2 |
| | Total | 4815 |

Universe: Applicable if the R reported more than 1 infertility problem (See IE-7 INFRTHIS1)

Male Respondent File Codebook :: SECTION I: Health Conditions and Health Services :: (IF) HIV testing and AIDS knowledge/counseling

DONBLOOD(3868-3868)

Variable Type: raw

IF-1: First, I'll ask you about blood and blood product donations you may have made to the Red Cross or other blood banks. By blood products, we mean such things as plasma, platelets, and marrow. Have you ever donated blood or blood products at the Red Cross, at a bloodmobile, at a blood drive, or at other blood banks?

| value | label | Total |
|-------|---------|-------|
| 1 | Yes | 1808 |
| 5 | No | 3006 |
| 8 | Refused | 1 |
| | Total | 4815 |

Universe: Applicable for all respondents

HIVTEST(3869-3869)

Variable Type: raw

IF-2 : (Not counting tests you may have had as part of donating blood or blood products,) Have you ever been tested for HIV?

| value | label | Total |
|-------|------------|-------|
| 1 | Yes | 2305 |
| 5 | No | 2480 |
| 8 | Refused | 1 |
| 9 | Don't know | 29 |
| | Total | 4815 |

Universe: Applicable for all respondents

Notes: use recode EVHIVTST

NOHIVTST(3870-3871)

Variable Type: raw

IF-2b: Which one of these reasons shown on Card 88 would you say is the MAIN reason why you have not been tested for HIV?

| value | label | Total |
|-------|---|-------|
| | INAPPLICABLE | 2335 |
| 1 | You have never been offered an HIV test | 568 |
| 2 | You are worried about what other people would think if you got tested for HIV | 9 |
| 3 | It's unlikely you ve been exposed to HIV | 1683 |
| 4 | You were afraid to find out if you were HIV positive (that you had HIV) | 26 |
| 5 | You don't like needles | 72 |
| 20 | Some other reason | 79 |
| 21 | R reported spouse or partner tested negative | 8 |
| 22 | Never had sexual intercourse | 10 |
| 23 | No health insurance or coverage, or R couldn't afford an HIV test | 5 |
| 97 | Not ascertained | 10 |
| 98 | Refused | 2 |
| 99 | Don't know | 8 |
| | Total | 4815 |

Universe: Applicable if R never had an HIV test outside of blood donation (IF-2 HIVTEST =5)

Notes: Category 21-23 did not appear on Card 88, but was volunteered by some respondents and coded in post-processing other-specify verbatim responses.

WHENHIV_M(3872-3873)

Variable Type: raw

IF-3m: (Not including tests you may have had as part of donating blood or blood products,) In what month and year was your <u>last</u> test for HIV, the virus that causes AIDS?

| value | label | Total |
|-------|------------------|-------|
| | INAPPLICABLE | 2510 |
| 1-12 | January-December | 1875 |
| 13 | Winter | 48 |
| 14 | Spring | 90 |
| 15 | Summer | 111 |
| 16 | Fall | 48 |
| 98 | Refused | 2 |
| 99 | Don't know | 131 |
| | Total | 4815 |

Universe: Applicable if R had any HIV test outside of blood donation (IF-2 HIVTEST =1)

WHENHIV_Y(3874-3877)

Variable Type: raw

IF-3y: ([Not including tests you may have had as part of donating blood or blood products,] In what month and year was your <u>last</u> test for HIV, the virus that causes AIDS?)

| value | label | Total |
|-----------|--------------|-------|
| | INAPPLICABLE | 2510 |
| 1931-2013 | 1931-2013 | 2264 |
| 9998 | Refused | 2 |
| 9999 | Don't know | 39 |
| | Total | 4815 |

Universe: Applicable if R had any HIV test outside of blood donation (IF-2 HIVTEST =1)

cmhivtst(3878-3881)

Variable Type: computed

Description : Century Month of last/most recent HIV test outside of blood donation. (Computed in Flow Check I-10)

| value | label | Total |
|-----------|---------------------|-------|
| | INAPPLICABLE | 2510 |
| 380-1340 | Before Sept 2011 | 1482 |
| 1341-1352 | Sept 2011-Aug 2012 | 553 |
| 1353-1365 | Sept 2012-Sept 2013 | 237 |
| 9998 | Refused | 1 |
| 9999 | Don't know | 32 |
| | Total | 4815 |

Universe: Applicable if R had any HIV test outside of blood donation (IF-2 HIVTEST =1)

HIVTSTYR(3882-3882)

Variable Type: raw

IF-3b: Did you have this last HIV test since [INTERVIEW MONTH, INTERVIEW YEAR - 1]?

| value | label | Total |
|-------|--------------|-------|
| | INAPPLICABLE | 4691 |
| 1 | Yes | 52 |
| 5 | No | 68 |
| 9 | Don't know | 4 |
| | | |

| Total | 4815 |
|-------|------|
|-------|------|

Universe: Applicable if R said DK/RF to year when received last HIV test (WHENHIV_Y = 98 or 99) or (R reported season/DK/RF on month (WHENHIV_M = 13-16,98,99) and estimated date of last HIV test was within 24 months of interview ((cmintvw - cmhivtst) < = 24))

HIVRESULT(3883-3883)

Variable Type: raw

IF-3d: After your last test for HIV, did you find out your test result?

| value | label | Total |
|-------|--------------|-------|
| | INAPPLICABLE | 2510 |
| 1 | Yes | 2128 |
| 5 | No | 177 |
| | Total | 4815 |

Universe: Applicable if R had any HIV test outside of blood donation (IF-2 HIVTEST =1)

WHYNOGET(3884-3885)

Variable Type: raw

IF-3e: What was the main reason why you did not receive your test result?

| value | label | Total |
|-------|---|-------|
| | INAPPLICABLE | 4638 |
| 1 | You thought the testing site would contact you | 94 |
| 2 | You were afraid to find out if you were HIV positive (that you had HIV) | 2 |
| 3 | You didn't want to know your HIV test results | 2 |
| 4 | You didn't know where or how to get your test result | 12 |
| 20 | Some other reason | 67 |
| | Total | 4815 |

Universe: Applicable if R did not get HIV test results (IF-3d HIVRESULT =5)

PLCHIV(3886-3887)

Variable Type: raw

IF-4 : Please look at Card 72. (Not including tests you may have had as part of donating blood or blood products,) Where did you have that last test for HIV?

| value | label | Total |
|-------|---|-------|
| | INAPPLICABLE | 2509 |
| 1 | Private doctor's office | 652 |
| 2 | HMO facility | 29 |
| 3 | Community health clinic, community clinic, public health clinic | 499 |
| 4 | Family planning or Planned Parenthood clinic | 113 |
| 5 | Employer or company clinic | 65 |
| 6 | School or school-based clinic (including college or university) | 71 |
| 7 | Hospital outpatient clinic | 102 |
| 8 | Hospital emergency room | 76 |
| 9 | Hospital regular room | 72 |
| 10 | Urgent care center, urgi-care, or walk-in facility | 43 |
| 11 | Your worksite | 24 |
| 12 | Your home | 34 |
| 13 | Military induction or military service site | 260 |
| 14 | Sexually transmitted disease (STD) clinic | 34 |
| 15 | Laboratory or blood bank | 73 |
| 20 | Some other place not shown separately | 40 |
| 21 | Prison or jail | 93 |
| | | |

| 22 | Mobile testing or community testing site | 11 |
|----|--|------|
| 23 | Drug, alcohol or rehabilitation treatment center | 9 |
| 99 | Don't know | 6 |
| | Total | 4815 |

Universe: Applicable if R had any HIV test outside of blood donation (IF-2 HIVTEST =1)

Notes: Category 21-23 did not appear on Card 72, but was volunteered by some respondents and coded in post-processing other-specify verbatim responses.

HIVTST(3888-3889)

Variable Type: raw

IF-5: Please look at Card 73b. I am going to show you a list of reasons why some people have been tested for HIV, the virus that causes AIDS. (Not including your blood donations,) Which of these would you say was the <u>main</u> reason for your last HIV test?

| value | label | Total |
|-------|---|-------|
| | INAPPLICABLE | 2510 |
| 1 | Part of a medical checkup or surgical procedure (a doctor or medical provider asked for the test) | 550 |
| 2 | Required for health or life insurance coverage | 80 |
| 3 | Required for marriage license or to get married | 65 |
| 4 | Required for military service or job | 345 |
| 5 | You wanted to find out if infected or not (you were the one who asked for the test) | 852 |
| 6 | Someone else suggested you should be tested (followed by WHOSUGG question) | 132 |
| 8 | You might have been exposed through sex or drug use | 85 |
| 9 | You might have been exposed in some other way | 47 |
| 20 | Some other reason - not shown separately | 68 |
| 21 | Required for immigration or travel | 26 |
| 22 | Required for incarceration | 37 |
| 23 | Required for school | 14 |
| 98 | Refused | 2 |
| 99 | Don't know | 2 |
| | Total | 4815 |

Universe: Applicable if R had any HIV test outside of blood donation (IF-2 HIVTEST =1)

Notes: Categories 21-23 did not appear on Card 73b, but were volunteered by some respondents and coded in post-processing other-specify verbatim responses.

WHOSUGG(3890-3890)

Variable Type: raw

IF-5b: Who suggested you should be tested -- a doctor or other medical care provider, a sexual partner, or someone else?

| value | label | Total |
|-------|---------------------------------------|-------|
| | INAPPLICABLE | 4683 |
| 1 | Doctor or other medical care provider | 34 |
| 2 | Sexual partner | 45 |
| 3 | Someone else | 53 |
| | Total | 4815 |

Universe: Applicable if R said someone suggested this last HIV test (IF-5 HIVTST =6)

TALKDOCT(3891-3891)

Variable Type: raw

IF-6 : Has a doctor or other medical care provider ever talked with you about HIV, the virus that causes AIDS?

| value | label | Total |
|-------|---------------|-------|
| 1 | Yes | 1521 |
| 5 | No | 3289 |
| 8 | Refused | 1 |
| 9 | Don't know | 4 |
| | Total | 4815 |

Universe: Applicable for all respondents

AIDSTALK01(3892-3893)

Variable Type: raw

IF-7: Looking at Card 74, what topics related to HIV or AIDS were covered in the discussion you had with the doctor or other health professional? (1st MENTION)

| value | label | Total |
|-------|--|-------|
| | INAPPLICABLE | 3294 |
| 1 | How HIV/AIDS is transmitted | 1174 |
| 2 | Other sexually transmitted diseases like gonorrhea, herpes, or Hepatitis ${\sf C}$ | 69 |
| 3 | The correct use of condoms | 61 |
| 4 | Needle cleaning/using clean needles | 12 |
| 5 | Dangers of needle sharing | 8 |
| 6 | Abstinence from sex (not having sex) | 18 |
| 7 | Reducing your number of sexual partners | 14 |
| 8 | Condom use to prevent HIV or STD transmission | 38 |
| 9 | "Safe sex" practices (abstinence, condom use, etc) | 58 |
| 10 | Getting tested and knowing your HIV status | 45 |
| 20 | Some other topic - not shown separately | 19 |
| 98 | Refused | 1 |
| 99 | Don't know | 4 |
| | Total | 4815 |

Universe : Applicable if R ever talked with a doctor or medical care provider about HIV/AIDS (IF-6 TALKDOCT =1)

AIDSTALK02(3894-3895)

Variable Type: raw

IF-7: Looking at Card 74, what topics related to HIV or AIDS were covered in the discussion you had with the doctor or other health professional? (2nd MENTION)

| value | label | Total |
|-------|---|-------|
| | INAPPLICABLE | 3469 |
| 1 | How HIV/AIDS is transmitted | 35 |
| 2 | Other sexually transmitted diseases like gonorrhea, herpes, or Hepatitis \ensuremath{C} | 865 |
| 3 | The correct use of condoms | 135 |
| 4 | Needle cleaning/using clean needles | 35 |
| 5 | Dangers of needle sharing | 38 |
| 6 | Abstinence from sex (not having sex) | 32 |
| 7 | Reducing your number of sexual partners | 21 |
| 8 | Condom use to prevent HIV or STD transmission | 74 |
| 9 | "Safe sex" practices (abstinence, condom use, etc) | 66 |
| 10 | Getting tested and knowing your HIV status | 43 |
| 20 | Some other topic - not shown separately | 2 |
| | Total | 4815 |

Universe : Applicable if R discussed more than 1 topic related to HIV/AIDS with the doctor (See IF-7 AIDSTALK01)

AIDSTALK03(3896-3897)

Variable Type: raw

IF-7: Looking at Card 74, what topics related to HIV or AIDS were covered in the discussion you had with the doctor or other health professional? (3rd MENTION)

| value | label | Total |
|-------|--|-------|
| | INAPPLICABLE | 3618 |
| 1 | How HIV/AIDS is transmitted | 15 |
| 2 | Other sexually transmitted diseases like gonorrhea, herpes, or Hepatitis C | 26 |
| 3 | The correct use of condoms | 637 |
| 4 | Needle cleaning/using clean needles | 80 |
| 5 | Dangers of needle sharing | 77 |
| 6 | Abstinence from sex (not having sex) | 83 |
| 7 | Reducing your number of sexual partners | 58 |
| 8 | Condom use to prevent HIV or STD transmission | 95 |
| 9 | "Safe sex" practices (abstinence, condom use, etc) | 75 |
| 10 | Getting tested and knowing your HIV status | 50 |
| 20 | Some other topic - not shown separately | 1 |
| | Total | 4815 |

Universe : Applicable if R discussed more than 2 topics related to HIV/AIDS with the doctor (See IF-7 AIDSTALK01)

AIDSTALK04(3898-3899)

Variable Type: raw

IF-7: Looking at Card 74, what topics related to HIV or AIDS were covered in the discussion you had with the doctor or other health professional? (4th MENTION)

| value | label | Total |
|-------|---|-------|
| | INAPPLICABLE | 3777 |
| 1 | How HIV/AIDS is transmitted | 16 |
| 2 | Other sexually transmitted diseases like gonorrhea, herpes, or Hepatitis \ensuremath{C} | 9 |
| 3 | The correct use of condoms | 18 |
| 4 | Needle cleaning/using clean needles | 434 |
| 5 | Dangers of needle sharing | 113 |
| 6 | Abstinence from sex (not having sex) | 113 |
| 7 | Reducing your number of sexual partners | 89 |
| 8 | Condom use to prevent HIV or STD transmission | 92 |
| 9 | "Safe sex" practices (abstinence, condom use, etc) | 95 |
| 10 | Getting tested and knowing your HIV status | 56 |
| 20 | Some other topic - not shown separately | 3 |
| | Total | 4815 |

Universe : Applicable if R discussed more than 3 topics related to HIV/AIDS with the doctor (See IF-7 AIDSTALK01)

AIDSTALK05(3900-3901)

Variable Type: raw

IF-7: Looking at Card 74, what topics related to HIV or AIDS were covered in the discussion you had with the doctor or other health professional? (5th MENTION)

| value | label | Total |
|-------|--|-------|
| | INAPPLICABLE | 3935 |
| 1 | How HIV/AIDS is transmitted | 2 |
| 2 | Other sexually transmitted diseases like gonorrhea, herpes, or Hepatitis C | 15 |
| 3 | The correct use of condoms | 4 |
| 4 | Needle cleaning/using clean needles | 9 |
| 5 | Dangers of needle sharing | 421 |
| 6 | Abstinence from sex (not having sex) | 74 |

| 7 | Reducing your number of sexual partners | 89 |
|----|--|------|
| 8 | Condom use to prevent HIV or STD transmission | 119 |
| 9 | "Safe sex" practices (abstinence, condom use, etc) | 87 |
| 10 | Getting tested and knowing your HIV status | 60 |
| | Total | 4815 |

Universe: Applicable if R discussed more than 4 topics related to HIV/AIDS with the doctor (See IF-7 AIDSTALK01)

AIDSTALK06(3902-3903)

Variable Type: raw

IF-7: Looking at Card 74, what topics related to HIV or AIDS were covered in the discussion you had with the doctor or other health professional? (6th MENTION)

| value | label | Total |
|-------|--|-------|
| | INAPPLICABLE | 4063 |
| 1 | How HIV/AIDS is transmitted | 5 |
| 2 | Other sexually transmitted diseases like gonorrhea, herpes, or Hepatitis C | 5 |
| 3 | The correct use of condoms | 4 |
| 4 | Needle cleaning/using clean needles | 3 |
| 5 | Dangers of needle sharing | 4 |
| 6 | Abstinence from sex (not having sex) | 388 |
| 7 | Reducing your number of sexual partners | 61 |
| 8 | Condom use to prevent HIV or STD transmission | 109 |
| 9 | "Safe sex" practices (abstinence, condom use, etc) | 105 |
| 10 | Getting tested and knowing your HIV status | 68 |
| | Total | 4815 |

Universe : Applicable if R discussed more than 5 topics related to HIV/AIDS with the doctor (See IF-7 AIDSTALK01)

AIDSTALK07(3904-3905)

Variable Type: raw

IF-7: Looking at Card 74, what topics related to HIV or AIDS were covered in the discussion you had with the doctor or other health professional? (7th MENTION)

| value | label | Total |
|-------|---|-------|
| | INAPPLICABLE | 4187 |
| 1 | How HIV/AIDS is transmitted | 1 |
| 2 | Other sexually transmitted diseases like gonorrhea, herpes, or Hepatitis \ensuremath{C} | 3 |
| 3 | The correct use of condoms | 1 |
| 4 | Needle cleaning/using clean needles | 3 |
| 5 | Dangers of needle sharing | 2 |
| 6 | Abstinence from sex (not having sex) | 2 |
| 7 | Reducing your number of sexual partners | 366 |
| 8 | Condom use to prevent HIV or STD transmission | 70 |
| 9 | "Safe sex" practices (abstinence, condom use, etc) | 107 |
| 10 | Getting tested and knowing your HIV status | 73 |
| | Total | 4815 |

Universe: Applicable if R discussed more than 6 topics related to HIV/AIDS with the doctor (See IF-7 AIDSTALK01)

AIDSTALK08(3906-3907)

Variable Type: raw

IF-7: Looking at Card 74, what topics related to HIV or AIDS were covered in the discussion you had with the doctor or other health professional? (8th MENTION)

| value | label | Total |
|-------|--|-------|
| . | INAPPLICABLE | 4294 |
| 1 | How HIV/AIDS is transmitted | 1 |
| 2 | Other sexually transmitted diseases like gonorrhea, herpes, or Hepatitis ${\sf C}$ | 2 |
| 4 | Needle cleaning/using clean needles | 1 |
| 5 | Dangers of needle sharing | 3 |
| 6 | Abstinence from sex (not having sex) | 2 |
| 7 | Reducing your number of sexual partners | 3 |
| 8 | Condom use to prevent HIV or STD transmission | 363 |
| 9 | "Safe sex" practices (abstinence, condom use, etc) | 66 |
| 10 | Getting tested and knowing your HIV status | 80 |
| | Total | 4815 |

Universe: Applicable if R discussed more than 7 topics related to HIV/AIDS with the doctor (See IF-7 AIDSTALK01)

AIDSTALK09(3908-3909)

Variable Type: raw

IF-7: Looking at Card 74, what topics related to HIV or AIDS were covered in the discussion you had with the doctor or other health professional? (9th MENTION)

| value | label | Total |
|-------|--|-------|
| | INAPPLICABLE | 4389 |
| 1 | How HIV/AIDS is transmitted | 2 |
| 2 | Other sexually transmitted diseases like gonorrhea, herpes, or Hepatitis C | 1 |
| 5 | Dangers of needle sharing | 2 |
| 6 | Abstinence from sex (not having sex) | 2 |
| 7 | Reducing your number of sexual partners | 2 |
| 8 | Condom use to prevent HIV or STD transmission | 1 |
| 9 | "Safe sex" practices (abstinence, condom use, etc) | 357 |
| 10 | Getting tested and knowing your HIV status | 58 |
| 20 | Some other topic - not shown separately | 1 |
| | Total | 4815 |

Universe: Applicable if R discussed more than 8 topics related to HIV/AIDS with the doctor (See IF-7 AIDSTALK01)

AIDSTALK10(3910-3911)

Variable Type: raw

IF-7: Looking at Card 74, what topics related to HIV or AIDS were covered in the discussion you had with the doctor or other health professional? (10th MENTION)

| value | label | Total |
|-------|---|-------|
| | INAPPLICABLE | 4465 |
| 1 | How HIV/AIDS is transmitted | 2 |
| 2 | Other sexually transmitted diseases like gonorrhea, herpes, or Hepatitis \ensuremath{C} | 1 |
| 6 | Abstinence from sex (not having sex) | 1 |
| 7 | Reducing your number of sexual partners | 2 |
| 8 | Condom use to prevent HIV or STD transmission | 2 |
| 9 | "Safe sex" practices (abstinence, condom use, etc) | 2 |
| 10 | Getting tested and knowing your HIV status | 340 |
| | Total | 4815 |

Universe : Applicable if R discussed more than 9 topics related to HIV/AIDS with the doctor (See IF-7 AIDSTALK01)

RETROVIR(3912-3912)

IF-8 : Please tell me if you think the following statement is definitely true, probably true, probably false, or definitely false, or if you don't know whether it is true or false. "There is a treatment available for pregnant women who are infected with the HIV virus to prevent passing the virus to their baby."

| value | label | Total |
|-------|-----------------------------|-------|
| 1 | Definitely true | 660 |
| 2 | Probably true | 1338 |
| 3 | Probably false | 969 |
| 4 | Definitely false | 589 |
| 5 | Don't know if true or false | 1248 |
| 8 | Refused | 1 |
| 9 | Don't know | 10 |
| | Total | 4815 |

Universe: Applicable for all respondents